

Park Bench Donation Program Department of Parks and Recreation

PARKS & RECREATION	City & County of Honolulu		
			Application #(DPR use only)
	APPLICAT	ON FORM	
Please fill out this ap Recreation as noted		& County of	Honolulu, Department of Parks and
DONOR INFORMAT	ION		
Date	Date Requested C&C of Honolulu Park		
Name			
Address			
			Zip Code
Telephone	Email		
or			
(Fill out the information be VENDOR NAME AN	elow and attach quotes upon DPR D ESTIMATE	approval)	
	e number		
PLAQUE/INSCRIPTION Vendor Vendor phone number			
			
Department of Parks Attention: Bench Do Phone 768-3034	and Recreation	Address:	City and County of Honolulu 1000 Uluohia St, Suite 309 Kapolei, Hawaii 96707
DPR Initial and Approval	Date:		

ATTACHMENT A